

HAZARD ABATEMENT PROJECT REQUEST FORM

ACTIVITY NAME AND ADDRESS:	Date submitted:
	Activity UIC:
	Major claimant:

PROJECT INFORMATION			
1. Project title: <i>(Describe action to abate/eliminate the hazard)</i>			
2. Project No.	3. Estimated Cost (\$K)	4. Risk Assessment Code <i>(Circle one)</i>	Probability Severity
		1 2 3 — —	
5. Problem: No. of people regularly exposed to the hazard:			
6. Proposed Corrective Action:			
7. Applicable Standards/Regulations:			
8. Citations (OSHA, STATE AGENCIES, NOIU, ETC.):			
9. Interim Controls:			
10. Points Of Contact <i>(Enter All Applicable)</i> :			
<u>Function Name</u>	<u>Phone</u>	<u>Fax</u>	<u>Internet E-mail</u>
a. NAVOSH _____	_____	_____	_____
b. Facilities: _____	_____	_____	_____
c. Claimant: _____	_____	_____	_____